CITY OF LADUE

NEW RETAIL BUSINESS LICENSE TAX DUE STATEMENT

A merchant business in the City of Ladue is required to obtain and maintain a Business License. License renewal paperwork and license tax fee are due each year by March 1st. Information for license tax fee calculation and responsibility of City business owners can be found in Chapter 50 of the City of Ladue Municipal code.

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|--|--|--|--|
| All the followi | ng items must be received in order to obtain a Business License: | | |
| ☐ License Tax Due Statement, Complete and Notarized | | | |
| | ☐ License Tax Due Worksheet — Based on actual gross receipts reported to the Department of Revenue. | | |
| | ☐ Accurate License Tax Payment | | |
| | No Tax Due letter from the Department of Revenue https://dor.mo.gov/taxation/business/filing-payment/no-tax-due/ | | |
| | Food Service Business: Proof of recent inspection with St. Louis County Department of Health | | |
| Business Informati | ON | | |
| Business Name: | | | |
| Address: | | | |
| Phone: | Other Phone: | | |
| Email: | il:Website: | | |
| Mailing/Billing Inf | ORMATION FOR YOUR RENEWAL (If different from above) | | |
| Name: | | | |
| Mailing Address: | | | |
| Phone: | Email: | | |
| Additional | | | |
| Business Description | on: | | |
| MO Sales Tax ID: _ | O Sales Tax ID: Number of Employees: | | |
| Property: Owned o | r Rented (circle one) If Rented, Property Owner Name & Phone: | | |
| | | | |

REMIT TO: City of Ladue 9345 Clayton Road Ladue, MO 63124

CITY OF LADUE NEW RETAIL BUSINESS TAX DUE WORKSHEET

| Busin | ESS NAME: | FOR THE YEAR OF | |
|--|---|---------------------------------------|--|
| Gross Receipts up to 2 million: Subtract \$12,500, divide by \$1,000 = Line 3 Amount of Gross Receipts <u>over</u> 2 million: Divide by \$500 = Line 4 | | | |
| Row | TAX FEE CALCULATIONS | ESTIMATED CURRENT YEAR | |
| 1 | Annual Gross Receipts | | |
| 2 | BASE FEE – (Minimum rate for first \$12,500 in revenue.) | \$50.00 | |
| 3 | GROSS RECEIPTS - \$12,500 to \$2,000,000 Divide by \$1.00 by \$1,000 | | |
| 4 | GROSS RECEIPTS – Over \$2,000,000 Divide by \$.50 per \$1,000 | | |
| 5 | Total Amount Due Total of Row 2-4 | | |
| this Tax Author | uthorized representative of the above business, I do hereby Due Statement & Worksheet is correct per sections 50-16 to lized Representative Name: | thru 50-53 of the City of Ladue code. | |
| | NOTARY | | |
| | f Missouri of | | |
| Subscribed and sworn to before me this day of in the year | | | |
| | | | |
| Notary | Public Public | | |

If you have any questions or need to verify correct payment amount you may email us at <u>licensing@cityofladue-mo.gov</u> or call (314) 993-3439. This application is also available in alternative format (e.g. large print, braille) by request.